County: Sawyer HAYWARD NURSING HOME 11040 N STATE ROAD 77 Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified? Nonprofit Church-Related Skilled No Yes Average Daily Census: 73

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Services Provided to Non-Residents		Age, Sex, and Primary Diagn	Length of Stay (12/31/0	0) %			
Home Health Care Supp. Home Care-Personal Care Supp. Home Care-Household Services Day Services Respite Care Adult Day Care Adult Day Health Care Congregate Meals Home Delivered Meals Other Meals Transportation Referral Service Other Services Provide Day Programming for Mentally Ill Provide Day Programming for Developmentally Disabled	No No No No No No No No No Yes No	Primary Diagnosis  Developmental Disabilities Mental Illness (Org./Psy) Mental Illness (Other) Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic Cancer Fractures Cardiovascular Cerebrovascular Diabetes Respiratory Other Medical Conditions	1. 4 23. 9 4. 2 2. 8 2. 8 0. 0 12. 7 8. 5 5. 6 2. 8 9. 9 25. 4	Age Groups Under 65 65 - 74 75 - 84 85 - 94 95 & Over 65 & Over  Sex  Mal e Femal e	7. 0 4. 2 33. 8 42. 3 12. 7 100. 0 93. 0	Less Than 1 Year 1 - 4 Years More Than 4 Years  **********************  Full-Time Equival Nursing Staff per 100 (12/31/00)  RNs LPNs Nursing Assistants Aides & Orderlies	29. 6 42. 3 28. 2  100. 0 **********************************
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## Method of Reimbursement

	Medicare (Title 18)			Medicaid (Title 19)			0ther		P	Private Pay			Managed Care			Percent	
			Per Die	m		Per Die	m		Per Diem	1		Per Diem	1	Ĭ	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	. %	Rate	No.	. %	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	4	6. 3	\$109. 25	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	4	5. 6%
Skilled Care	2		\$111.00	55	85. 9	\$93. 69	Ĭ	100. 0	\$93. 69	4		\$116.00	Ŏ	0. 0	\$0.00	$6\overline{2}$	87. 3%
Intermediate				5	7.8	\$78. 14	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	5	7.0%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	<b>\$0. 00</b>	0	0.0	<b>\$0. 00</b>	0	0.0	<b>\$0. 00</b>	0	0.0	<b>\$0. 00</b>	0	0.0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj		0.0	<b>\$0. 00</b>	0	0.0	<b>\$0. 00</b>	0	0.0	<b>\$0. 00</b>	0	0.0	<b>\$0. 00</b>	0	0.0	\$0.00	0	0.0%
Ventilator-Depender	nt 0	0.0	<b>\$0. 00</b>	0	0.0	<b>\$0. 00</b>	0	0.0	<b>\$0. 00</b>	0	0.0	<b>\$0. 00</b>	0	0.0	<b>\$0. 00</b>	0	0.0%
Total	2	100.0		64	100. 0		1	100. 0		4	100.0		0	0.0		71	100.0%

Admissions, Discharges, and Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Deaths During Reporting Period % Needi ng Total Assi stance of Activities of Percent Admissions from: % Totally Number of Private Home/No Home Health Daily Living (ADL) Independent One Or Two Staff Dependent Resi dents 11.6 Private Home/With Home Health 4. 7 Bathi ng 4. 2 59. 2 36. 6 71 Other Nursing Homes 20.9 Dressi ng 12.7 60.6 26.8 71 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Transferring 22. 5 71 58. 1 32. 4 45. 1 16.9 28. 2 0.0 Toilet Use 54. 9 71 0.0 Eating 47.9 40.8 11.3 71 Other Locations 4.7 Total Number of Admissions Continence Special Treatments 43 Receiving Respiratory Care
Receiving Tracheostomy Care
Receiving Suctioning
Receiving Ostomy Care Percent Discharges To: Indwelling Or External Catheter 1.4 11. 3 Private Home/No Home Health 0.0 Occ/Freq. Incontinent of Bladder 49.3 0.0 Private Home/With Home Health 28.3 Occ/Freq. Incontinent of Bowel 31.0 0.0 Other Nursing Homes 13.0 5. 6 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 13.0 2.8 Mobility Physically Restrained 4. 2 0.0 35. 2 0.0 Other Locations 2. 2 Skin Care Other Resident Characteristics 5. 6 Deaths 43.5 With Pressure Sores Have Advance Directives 98.6 Total Number of Discharges With Rashes Medications 1.4 Receiving Psychoactive Drugs 63. 4 (Including Deaths)

 $Selected\ Statistics:\ This\ Hospital\ - Based\ Facility\ Compared\ to\ Similar\ Facilities\ \&\ Compared\ to\ All\ Facilities$ 

	Thi s	Other Hospital-			Al l		
	Facility	Based I	Facilities	Faci	Facilties		
	%	%	Ratio	%	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	96. 1	87. 5	1. 10	84. 5	1. 14		
Current Residents from In-County	88. 7	83. 6	1.06	77. 5	1. 15		
Admissions from In-County, Still Residing	41. 9	14. 5	2.89	21. 5	1. 95		
Admissions/Average Daily Census	<b>58</b> . 9	194. 5	0. 30	124. 3	0.47		
Discharges/Average Daily Census	63. 0	199. 6	0. 32	126. 1	0. 50		
Discharges To Private Residence/Average Daily Census	17. 8	102. 6	0. 17	49. 9	0. 36		
Residents Receiving Skilled Care	93. 0	91. 2	1. 02	83. 3	1. 12		
Residents Aged 65 and Older	93. 0	91. 8	1. 01	87. 7	1.06		
Title 19 (Medicaid) Funded Residents	90. 1	66. 7	1. 35	69. 0	1.31		
Private Pay Funded Residents	5. 6	23. 3	0. 24	22. 6	0. 25		
Developmentally Disabled Residents	1. 4	1.4	1.03	7. 6	0. 18		
Mentally Ill Residents	28. 2	30. 6	0. 92	33. 3	0.84		
General Medical Service Residents	25. 4	19. 2	1. 32	18. 4	1.38		
Impaired ADL (Mean)*	51. 5	51. 6	1. 00	49. 4	1.04		
Psychological Problems	63. 4	52. 8	1. 20	50. 1	1. 27		
Nursing Care Required (Mean)*	7. 7	7. 8	0. 99	7. 2	1.08		